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Denise L. Wright	(Depositor's name)
<i>Denise L. Wright</i>	(Signature)
July 14, 2010	(Date)

APPLICATION NO.	FILING DATE	FIRST NAMED INVENTOR	ATTORNEY DOCKET NO.	CONFIRMATION NO.
10/594,381	06/11/2007	Anthony Christopher Bernard Molleno	BAL D 3340	8102

TITLE OF INVENTION: OPHTHALMIC IMPLANT FOR TREATING GLAUCOMA

APPLN. TYPE	SMALL ENTITY	ISSUE FEE DUE	PUBLICATION FEE DUE	PREV. PAID ISSUE FEE	TOTAL FEE(S) DUE	DATE DUE
nonprovisional	YES	\$755	\$300	\$0	\$1055	08/18/2010

EXAMINER	ART UNIT	CLASS-SUBCLASS
DEAK, LESLIE R	3761	604-008000

1. Change of correspondence address or indication of "Fee Address" (37 CFR 1.563).

- ☐ Change of correspondence address (or Change of Correspondence Address form PTO/SB/122) attached.
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- (1) the names of up to 3 registered patent attorneys or agents OR, alternatively,
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Senniger Powers LLP

3. ASSIGNEE NAME AND RESIDENCE DATA TO BE PRINTED ON THE PATIENT (print or type)

PLEASE NOTE: Unless an assignee is identified below, no assignee data will appear on the patent. If an assignee is identified below, the document has been filed for recordation as set forth in 37 CFR 3.11. Completion of this form is NOT a substitute for filing an assignment.

(A) NAME OF ASSIGNEE

(B) RESIDENCE: (CITY and STATE OR COUNTRY)

Molteno Ophthalmic Ltd.

Dunedin, New Zealand

Please check the appropriate assignee category or categories (will not be printed on the patent): ☐ Individual ☒ Corporation or other private group entity ☐ Government

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- ☐ a. Applicant claims SMALL ENTITY status. See 37 CFR 1.27. ☐ b. Applicant is no longer claiming SMALL ENTITY status. See 37 CFR 1.27(g)(2).

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Date July 14, 2010

Typed or printed name Timothy B. McBride

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